


Blotter Number:

 <p><b>Town of Warwick Police Department</b> 132 Kings Hwy Warwick NY 10990 845.986.5000</p>	<b>Security Check Request Form</b>		
	Last Name:	First Name:	Middle:
	Address:		
	Cell:	Home:	Other:
	Residential: <input type="checkbox"/>	Business: <input type="checkbox"/>	
	Departure Date:	Return Date:	
*Not to exceed 14 days **Not to be used for vacant properties *** Must be completed by owner			

Premise Alarmed? Yes  No  Audible  Alarm Company:

Premise equipped with cameras? Yes  No  Type:

Are lights smart lights or on timers? Yes  No  Locations:

Are animals on premise? Yes  No  Species:

Will any vehicles be left on premise? Yes  No  If so, please complete below:

Plate Number	Make	Model	Year	Color

Will anyone have access to your property will you are away? Yes  No  If so, please complete below:

Name	Address	Contact

In case of emergency contact:

Name	Address	Contact

I, do hereby, request that the Town of Warwick Police conduct a property check of my property listed above. I understand that this is courtesy, and all efforts will be made to conduct said check as time and manpower allow, but is not guaranteed. I, do hereby, hold harmless the Town of Warwick Police Department and its officers/agents in the course of the aforementioned check.

Signature:	Date:
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